

Tempe Parks and Recreation

Soccer Registration Form

Fall 2004

Please Print and use black or blue ink Only.

Fill out the form completely. Give as much background as possible about your team. Approach the Registration Form with the thought that Parks and Recreation does not know your team.

Team Name _____

Former Team Name _____

Manager _____

Address _____ APT # _____

City _____ Zip _____

Phone (Home) _____ (Work) _____ (FAX) _____

Phone (Pager) _____ (Mobile) _____ (E-mail) _____

CIRCLE THE LEAGUE YOU ARE REQUESTIONING:

Competitive

Recreational

Teams with previous Tempe experience please answer the following. This information is important!

Spring 2004	Classification _____	Field _____	Record _____
Fall 2003	Classification _____	Field _____	Record _____

If you are requesting a classification change -- why? _____

Are you a newly formed team? If yes, why have you requested the above classification?

Have you been playing in another city? What city? _____ Under what classification? _____

What was your record? _____

Please understand that once the team registers no refunds are available unless the league is cancelled.

FOR STAFF USE ONLY

ENTRY FEE: _____ PAID BY: _____ STAFF: _____